



General

Title

Oral cavity squamous cell carcinoma: percentage of patients who undergo surgical management of oral cavity squamous cell carcinoma for whom there is no unplanned hospital readmission within 30 days of discharge.

Source(s)

Nussenbaum B. National Quality Measures Clearinghouse measure submission form percentage of patients who undergo surgical management of oral cavity squamous cell carcinoma for whom there is no unplanned hospital readmission within 30 days of discharge. St. Louis (MO): Washington University School of Medicine; 2016 Feb 11. 11 p. [7 references]

Measure Domain

Primary Measure Domain

Related Health Care Delivery Measures: Use of Services

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of patients who undergo surgical management of oral cavity squamous cell carcinoma for whom there is no unplanned hospital readmission within 30 days of discharge.

Rationale

Head and neck cancer is the sixth most common cancer worldwide and is responsible for 5% to 10% of all new cancer cases annually in the United States. It is a disease associated with significant mortality and results in more than 350,000 deaths annually.

There is a growing national imperative to improve the quality of cancer care. Recommendation number three from the Institute of Medicine, in its 10 Recommendations for Improving the Quality of Cancer Care in America, is to measure and monitor the quality of care using a core set of quality measures. A call for the development of quality measures for patients with oral cavity squamous cell carcinoma (OCSCC) was approved by the executive council of the American Head and Neck Society (AHNS) in 2007. Nationally endorsed and validated quality measures for patients with OCSCC do not yet exist. To improve the quality of oral cavity cancer care, reliable and valid measures of health care quality must be

developed.

These indicators can be used to assess the quality of care delivered to patients with oral cavity squamous cell carcinoma. By providing for a consistent approach to measuring quality (same indicators, same definitions, same data elements) these measures would allow institutions to have reliable performance data to benchmark current performance levels, identify areas for improvement, evaluate the effects of quality improvement projects, and provide comparisons across centers.

The indicator is intended to monitor the percentage of patients who undergo surgical management of oral cavity squamous cell carcinoma for whom there is no unplanned hospital readmission within 30 days of discharge.

Evidence for Rationale

Bezerra RL, de Carvahlo AY, de Carvahlo GB, Lewis CM, Weber RS, Kowalski LP. Quality assessment in head and neck oncologic surgery in a Brazilian cancer center compared with MD Anderson Cancer Center benchmarks. Head Neck. 2016 Jul;38(7):1002-7. PubMed

Chen AY. The development of quality of care measures for oral cavity cancer. Arch Otolaryngol Head Neck Surg. 2008 Jun;134(6):672. PubMed

Gourin CG, Couch ME. Defining quality in the era of health care reform. JAMA Otolaryngol Head Neck Surg. 2014 Nov;140(11):997-8. PubMed

Hessel AC, Moreno MA, Hanna EY, Roberts DB, Lewin JS, El-Naggar AK, Rosenthal DI, Weber RS. Compliance with quality assurance measures in patients treated for early oral tongue cancer. Cancer. 2010 Jul 15;116(14):3408-16. PubMed

Krouse JH. Variation, cost, and quality of care. Head Neck. 2015 Jun;38(7):1002-7. PubMed

Nussenbaum B. National Quality Measures Clearinghouse measure submission form: percentage of patients who undergo surgical management of oral cavity squamous cell carcinoma for whom there is no unplanned hospital readmission within 30 days of discharge. St. Louis (MO): Washington University School of Medicine; 2016 Feb 11. 11 p. [7 references]

Weber RS, Lewis CM, Eastman SD, Hanna EY, Akiwumi O, Hessel AC, Lai SY, Kian L, Kupferman ME, Roberts DB. Quality and performance indicators in an academic department of head and neck surgery. Arch Otolaryngol Head Neck Surg. 2010 Dec;136(12):1212-8. PubMed

Primary Health Components

Oral cavity squamous cell carcinoma; 30-day readmission rate

Denominator Description

Number of patients who undergo curative intent surgery for oral cavity squamous cell carcinoma (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Number of patients who undergo curative intent surgery for oral cavity squamous cell carcinoma and do not have an unplanned hospital readmission within 30 days of discharge following the curative intent surgery (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

Quality indicators were identified from available literature, consensus guidelines, and head and neck cancer experts. Adherence with individual quality measures and a composite measure of all indicators was assessed via retrospective chart review on 192 patients with previously untreated oral cavity squamous cell carcinoma who underwent surgery at a tertiary care academic medical center between 2003 and 2010. Of the 19 proposed measures, 4 maintained a robust correlation between performance of the measure and improved survival on univariable and multivariable analysis.

Refer to Association of Compliance with Process-related Quality Metrics and Improved Survival in Oral Cavity Squamous Cell Carcinoma for additional measure testing information.

Evidence for Extent of Measure Testing

Graboyes EM, Gross J, Kallogieri D, Piccirillo JF, Al-Gilani M, Stadler ME, Nussenbaum B. Association of compliance with process-related quality metrics and improved survival in oral cavity squamous cell carcinoma. JAMA Otolaryngol Head Neck Surg. 2016 May 1;142(5):430-7. [34 references] PubMed

Nussenbaum B. National Quality Measures Clearinghouse measure submission form: percentage of patients who undergo surgical management of oral cavity squamous cell carcinoma for whom there is no unplanned hospital readmission within 30 days of discharge. St. Louis (MO): Washington University School of Medicine; 2016 Feb 11. 11 p. [7 references]

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Professionals Involved in	Delivery of Health Services
not defined yet	

Least Aggregated Level of Services Delivery Addressed

Individual Clinicians or Public Health Professionals

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Age greater than or equal to 18 years

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

Living with Illness

IOM Domain

Effectiveness

Data Collection for the Measure

Case Finding Period

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Patient/Individual (Consumer) Characteristic

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All patients greater than or equal to 18 years of age undergoing definitive surgical management for oral cavity squamous cell carcinoma

Exclusions

Mortality during the index hospitalization

Previous treatment of oral cavity cancer

Prior history of head and neck cancer

Histology other than squamous cell carcinoma (or its histologic subtypes)

Management strategy other than up-front definitive intent surgery +/- postoperative adjuvant therapy

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of patients who undergo curative intent surgery for oral cavity squamous cell carcinoma and do not have an unplanned hospital readmission within 30 days of discharge following the curative intent surgery

Note: Admissions identified as planned by the planned readmissions algorithm are not counted as readmissions. The "algorithm" is a set of criteria for classifying readmissions as planned using Medicare claims. The principles underlying the Centers for Medicare & Medicaid Services (CMS) algorithm are:

- A few limited types of care are always considered planned;
- Otherwise, a planned readmission is defined as a non-acute readmission for a scheduled procedure;
- · Admissions for acute illness or for complications are never planned.

Exclusions

Unspecified

Numerator Search Strategy

Fixed time period or point in time

Registry data Type of Health State Proxy for Health State Instruments Used and/or Associated with the Measure Unspecified Computation of the Measure Measure Specifies Disaggregation Does not apply to this measure Scoring Rate/Proportion Interpretation of Score Does not apply to this measure (i.e., there is no pre-defined preference for the measure score) Allowance for Patient or Population Factors not defined yet Standard of Comparison not defined yet **Identifying Information** Original Title Percentage of patients who undergo surgical management of oral cavity squamous cell carcinoma for whom there is no unplanned hospital

Data Source

Administrative clinical data

readmission within 30 days of discharge.

Measure Collection Name

Oral Cavity Squamous Cell Carcinoma

Submitter

Washington University School of Medicine - Academic Institution

Developer

Washington University School of Medicine - Academic Institution

Funding Source(s)

Unspecified

Composition of the Group that Developed the Measure

- Brian Nussenbaum, MD
- Evan M. Graboyes, MD
- Dorina Kallogieri, MD
- Jay F. Piccirillo, MD
- Michael E. Stadler, MD
- Jennifer Gross, MD
- Maha al-Gilani, MD

Financial Disclosures/Other Potential Conflicts of Interest

No relevant disclosures of conflicts of interest

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2016 Feb

Measure Maintenance

Unspecified

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in January 2017.

Measure Availability

Source not available electronically.

For more information, contact Brian Nussenbaum, MD, at the Washington University School of Medicine, Department of Otolaryngology—Head and Neck Surgery, 600 S. Euclid Avenue, Campus Box 8115, St. Louis, MO 63110; Phone: 314-362-6599; Fax: 314-362-7522; Email: nussenbaumb@ent.wustl.edu.

NQMC Status

This NQMC summary was completed by ECRI Institute on September 12, 2016. The information was verified by the measure developer on September 13, 2016.

The information was reaffirmed by the measure developer on January 17, 2017.

Copyright Statement

No copyright restrictions apply.

Production

Source(s)

Nussenbaum B. National Quality Measures Clearinghouse measure submission form: percentage of patients who undergo surgical management of oral cavity squamous cell carcinoma for whom there is no unplanned hospital readmission within 30 days of discharge. St. Louis (MO): Washington University School of Medicine; 2016 Feb 11. 11 p. [7 references]

Disclaimer

NQMC Disclaimer

The National Quality Measures Clearinghouseâ, ϕ (NQMC) does not develop, produce, approve, or endorse the measures represented on this site.

All measures summarized by NQMC and hosted on our site are produced under the auspices of medical specialty societies, relevant professional associations, public and private organizations, other government agencies, health care organizations or plans, individuals, and similar entities.

Measures represented on the NQMC Web site are submitted by measure developers, and are screened solely to determine that they meet the NQMC Inclusion Criteria.

NQMC, AHRQ, and its contractor ECRI Institute make no warranties concerning the content or its reliability and/or validity of the quality measures and related materials represented on this site. Moreover, the views and opinions of developers or authors of measures represented on this site do not necessarily state or reflect those of NQMC, AHRQ, or its contractor, ECRI Institute, and inclusion or hosting of measures in NQMC may not be used for advertising or commercial endorsement purposes.

Readers with questions regarding measure content are directed to contact the measure developer.